## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number
10 10005715

| CLAIMS AS FILED - PART I (Column 1) (Column 2) |  |   |                    |                                   |                       |                   |                | SMALL ENTITY TYPE  |                        |                  | OTHER THAN OR SMALL ENTITY    |                        |
|--|--|---|--------------------|-----------------------------------|-----------------------|-------------------|----------------|--------------------|------------------------|------------------|-------------------------------|------------------------|
| TC   | OTAL CLAIMS                                    |   | 7                  |                                   |                       | 1111 2/           | Γ              | RATE               | FEE                    | OR<br><b>7 I</b> | RATE                          | FEE                    |
| FO   | DR   |   | NUMBER F           | FILED                             | NUME                  | BER EXTRA         | E              | BASIC FEE          |                        | OR               | BASIC FEE                     |                        |
| TC   | OTAL CHARGEA                                   | ABLE CLAIMS                                 |                    | nus 20=                           | *                     |                   |                | X\$ 9=             | 1                      | OR               | Wa.a                          |                        |
| INE  | DEPENDENT CL                                   | LAIMS                                       | Z min              | inus 3 =                          | *                     | _                 |                | X42=               |                        | 1                | You                           |                        |
| MU   | JLTIPLE DEPEN                                  | NDENT CLAIM PE                              | RESENT             |                                   |                       |                   | t              |                    |                        | OR               |                               |                        |
| * If   | the difference                                 | e in column 1 is                            | less than ze       | ero, ente                         | er "0" in c           | column 2          | L              | +140=<br>TOTAL     | 370                    | OR               | <u> </u>                      | <b> </b>               |
|  |  | CLAIMS AS A                                 |                    |                                   |                       |                   |                | TOTAL              | 2 to                   | OR               | TOTAL OTHER                   | THAN                   |
|  |  | (Column 1)                                  |                    | (Colur                            | ımn 2)                | (Column 3)        |                | SMALL E            |                        | OR               | SMALL E                       |                        |
| AMENDMENT A                                    |  | REMAINING<br>AFTER<br>AMENDMENT             |                    |                                   | IBER                  | PRESENT<br>EXTRA  |                | RATE               | ADDI-<br>TIONAL<br>FEE |                  | RATE                          | ADDI-<br>TIONAL<br>FEE |
| NON  | Total  | *   | Minus              | **                                |                       | =                 | L              | X\$ 9=             |                        | OR               | X\$18=                        |                        |
| AME  | Independent FIRST PRESE                        | *<br>ENTATION OF MU                         | Minus              | ***<br>PENDENT                    | TOL AIM               | =                 |                | X42=               |                        | OR               | X84=                          |                        |
| <u> </u>                                       | FIROTTILE                                      | NIAHOR G                                    | JLI IFLL DE.       | ENULIV                            | CLATIVI               |                   |                | +140=              |                        | OR               | +280=                         |                        |
|  |  |   |                    |                                   |                       |                   | <b>L</b><br>40 | TOTAL<br>DDIT. FEE |                        |                  | TOTAL<br>ADDIT. FEE           |                        |
| _  |  | (Column 1)                                  |                    | (Colur                            |                       | (Column 3)        | \              | )DH. FEE <b>=</b>  |                        |                  | ADDII. FEL                    | -                      |
| AMENDMENT B                                    |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                    | HIGH<br>NUMI<br>PREVIO<br>PAID    | MBER<br>OUSLY         | PRESENT<br>EXTRA  |                | RATE               | ADDI-<br>TIONAL<br>FEE |                  | RATE                          | ADDI-<br>TIONAL<br>FEE |
| NON  | Total  | * 7   | Minus              | ** 3                              | 30                    | =                 | 1              | X\$ 9=             |                        | OR               | X\$18=                        |                        |
| AME  | Independent<br>FIRST PRESE                     | * 2<br>ENTATION OF MU                       | Minus ULTIPLE DEP  | *** PENDENT                       | S AIM                 |                   |                | X42=               |                        | OR               | X84=                          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                    |                                   |                       |                   |                | +140=              |                        | OR               | +280=                         |                        |
|  |  |   |                    |                                   |                       |                   |                | TOTAL<br>DDIT. FEE |                        | L                | TOTAL<br>ADDIT. FEE           |                        |
| (Column 1) (Column 2) (Column 3)               |  |   |                    |                                   |                       |                   |                | UII. 1 LL L        |                        | ,                | ADUH, FEL                     |                        |
| AMENDMENT C                                    |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                    | HIGHI<br>NUME<br>PREVIC<br>PAID F | HEST<br>IBER<br>OUSLY | PRESENT<br>EXTRA  |                |                    | ADDI-<br>TIONAL<br>FEE |                  | RATE                          | ADDI-<br>TIONAL<br>FEE |
| END  | Total  |   | Minus              | **                                | !                     | =                 | ];             | X\$ 9=             |                        | OR               | X\$18=                        |                        |
| AM   | Independent<br>FIRST PRESE                     | *<br>ENTATION OF MU                         | Minus  ULTIPLE DEP | PENDENT                           | CLAIM                 | =                 |                | X42=               |                        | OR               | X84=                          |                        |
|  |  | <del></del>                                 |                    | •                                 |                       |                   | 1              | +140=              |                        | OR               | +280=                         |                        |
| **   | If the "Highest Nun                            | mn 1 is less than the mber Previously Pai   | aid For" IN THIS   | S SPACE is                        | is less than          | n 20. enter "20." | L              | TOTAL              |                        |                  | TOTAL                         |                        |
| ***  | If the "Highest Nur                            | imber Previously Pa<br>nber Previously Paid | aid For" IN THIS   | S SPACE is                        | is less than          | n 3. enter "3 "   |                | DIT. FEE           |                        |                  | ADDIT. FEE <b>L</b><br>umn 1. | - II                   |